	AIGN CONTRIBUTIONS AND	J EXPENSES REPO	JKI		Z^>	tate of Nevada
MA Name (p	IRC GOHRES	Office (if applicab	ole)		Ussen	strict (if applicable)
10	tog Pacific Pali	SADES AVE.	LAS	UEGAS, A	UV 8914	/
_	Address (include city and zip code)				Telephone No. 7 <i>6</i> 2 - 7 <i>68</i> - 8	598
E-Mail A	ddress MARLGOHRES C	EARTHLINK. A	JET			
Select A	ppropriate Box(es) CANDIDA	ATE PAC BAG	□ POL	.PRTY   IND E	(P NONPROFI	CORP
	AMENDE	D ANNUAL FILING		TIONERS WHO INIT	TATE/CIRCULATE PE	ETITION & RECEIVE
			UKI	EXPEND FUNDS IN	EXCESS OF TOR	
	Annual Filing - Due January					
	Period: January 1, 2005 – Decembe				F	LE
Ш	Report #1 — Due August 8, 3 Period: Jan. 1, 2006 — Aug 3, 20				"	
⊠.	Report #2 Due — October 31	1. 2006*			MAY 1	<b>6</b> 2006
<u>حر</u>	Period: Aug. 4, 2006 — Oct. 26,				Cu	tified.
	Report #3 Due — January 15				DEAN SECRETAR	HÉLLER Y OF STATE
	Period: Oct. 27, 2006 — Dec. 31	, 2006				FICE USE ONLY
	Annual Filing – Due January Period: January 1, 2006 – De					
	•			far affian in 4k-	2006 clootics :	clo
	These Reports are filed by incu Third Report suffices for 2007 /					
	CONTRIBUTIONS S	UMMARY				Cumulative From Beginning Report Period #1
	CONTINUESTICATE				This Period	through End of This Reporting
						Period
1	. Total Monetary Contributions Received (See page 1 of instruction sheet)	in Excess of \$100				
2	. Total Monetary Contributions Received	l of \$100 or Less			0	
,	(See page 2 of instruction sheet)  3. Total Monetary Contributions in the fo	rm of loans quaranteed by	a third		<u> </u>	
•	party. (See page 2 of instruction she		a palu		0	<u> </u>
4	Total Monetary Contributions in the for (See page 2 of instruction sheet)	m of loans that were forgiv	/en		0	
	food bade a or managenery	This Pe	riod	Cumulative From Beginning of		
				Report Period #1 Through End of		
				This Reporting Period		
5	<ol> <li>Total Amount of Monetary Contribution</li> <li>Received</li> </ol>	itions				
,	(Add Lines 1 through 4) (See page 2 of 5. Total Amount of Written Commitments			1		
(	Contributions (When commitment is funded			-		
	contribution (monetary or in kind)) (See page 2 of instruction sheet)		_0	0		
7	<ol> <li>Total Value of In Kind Contributions F Excess of \$100 (See page 2 of interest)</li> </ol>		$\cap$	0		
	,	-				
		EXPENSI	ES SUM	MARY		
1	<ol> <li>Total Monetary Expenses Paid in Ex- (See page 2 of instruction sheet)</li> </ol>	cess of \$100			A	198
9	Total Monetary Expenses Paid of \$10	0 or Less				
	(See page 2 of instruction sheet)  10. Total Amount of All Monetary Exp	enses Paid			<i>D</i>	
	(Add Lines 8 and 9) (See page 2	of instruction sheet)		1		1,989
	<ol> <li>Total Value of In Kind Expenses in E of \$100 (See page 3 of instruction</li> </ol>	n sheet)	0			•
	<ol><li>Disposition of Unspent Contributions</li></ol>	•				
. !	Only reported on Report #3 , Annual I day of the second month after candida	Report or 15 <sup>th</sup> ates defeat or				
!	Only reported on Report #3 , Annual I	Report or 15 <sup>th</sup> ates defeat or				
	(Only reported on Report #3 , Annual I day of the second month after candida incumbent does not run for reelection (See page 3 of instruction sheet)	Report or 15 <sup>th</sup> ates defeat or ) ———— AFFI	RMATIC			
	Only reported on Report #3 , Annual I day of the second month after candida incumbent does not run for reelection	Report or 15 <sup>th</sup> ates defeat or ) ———— AFFI				,
	(Only reported on Report #3 , Annual I day of the second month after candida incumbent does not run for reelection (See page 3 of instruction sheet)	Report or 15 <sup>th</sup> ates defeat or ) ———— AFFI			5/14	106

. - .

MARC	GOHRES
Name (print)	

Office (if applicable)

District (if applicable)

# Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
NONE	-	_	<del>-</del>	_	
			·		

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MARC	GOHRES
Name (print)	

Office (if applicable)

District (if applicable)

### Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT
NONE		

This page may be copied or duplicated if additional space is needed.

MALC Name (print)

GOHNES

Office (if applicable)

District (if applicable)

#### **Expense Categories**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	ļ
Other miscellaneous expenses	J

<sup>\*\*</sup> NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

GOHNES

Name (print)

Office (if applicable)

District (if applicable)

#### Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
NONE	_		
			:
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PAGE 5 OF 9

### IN KIND CONTRIBUTIONS AND EXPENSES REPORT

# IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

**Examples of in kind contributions:** (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

**Example of in kind expenses:** (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

PAGE 6 OF 9

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Name (print)

Office (if applicable)

District (if applicable)

### **IN KIND**

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
NONE		1		_		_
			,			

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Name (print)

Office (if applicable)

District (if applicable)

# In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100 Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT
NONE	_	

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PAGE 8 OF 9

MARC	
Name (print)	

GOHRES

Office (if applicable)

District (if applicable)

#### **IN KIND**

### Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
NONE	_	~	
			_

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A.200, 294A.210, 294A.220, 294A.362

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